

TRAINING OFFICER MANUAL



JANUARY 1999

UTAH DEPARTMENT OF HEALTH
DIVISION OF HEALTH SYSTEMS IMPROVEMENT
BUREAU OF EMERGENCY MEDICAL SERVICES

TABLE OF CONTENTS

TABLE OF CONTENTS.....	0
INTRODUCTION	2
GENERAL INFORMATION.....	2
TRAINING OFFICER RESPONSIBILITIES:	2
CME REQUIREMENTS FOR RECERTIFICATION:.....	3
Specified Skills:	4
1. Group training:	4
2. Teaching classes:.....	5
3. Use of Audio-Visuals:	5
4. Computer use:	5
5. Journals	5
CPR Requirement	5
CME RECORDS	5
AGENCY WRITTEN AND PRACTICAL TEST PROCEDURES	6
AFFILIATED RECERTIFICATION CHECKLIST	7
NON-AFFILIATED RECERTIFICATION REQUIREMENTS	8
EMT INSTRUCTOR CERTIFICATION REQUIREMENTS	9
EMS INSTRUCTOR RECERTIFICATION REQUIREMENTS.....	9
COURSE COORDINATOR CERTIFICATION REQUIREMENTS	10
COURSE COORDINATOR RECERTIFICATION REQUIREMENTS	10
TRAINING OFFICER CERTIFICATION REQUIREMENTS	11
TRAINING OFFICER RECETIFICATION REQUIREMENTS	11
ADJUSTING EMT’S RECERTIFICATION DATE TO COINCIDE WITH THEIR AGENCY	11
LAPSED CERTIFICATION	11
EMT RECIPROCITY REQUIREMENTS	12
UTAH PARAMEDIC RECIPROCITY INFORMATION	13

INTRODUCTION

This handbook has been developed for Training Officers of agencies and organizations having State certified EMS personnel. The purpose of the handbook is to provide the Training Officers with information and guidelines, which will enable them to maintain agency CME records, submit recertification materials and administer the recertification practical examination.

Changes will occur periodically and will be available through the Bureau of Emergency Medical Services (BUREAU) Standards and Evaluations staff or at the Instructor/Training Officer Seminars. It will be the responsibility of the Training Officer to become familiar with the material enclosed and to ensure that the most current information is obtained from the BUREAU. Policies and procedures should be reviewed annually to ensure that current standards are being met. Notification of changes in the material may appear in the Bureau newsletter. Additional handbooks are available from the Bureau for cost.

GENERAL INFORMATION

A Training Officer must be designated by each emergency medical service organization. The agency and Training Officer must sign an official Bureau Letter of Commitment, and the agency must send a Letter of Designation, to the Bureau identifying the new Training Officer. The Letter of Commitment and Letter of Designation must be provided to the Bureau with a change of the Training Officer. Training officers must be certified EMT Instructors and they must successfully complete the BUREAU sponsored new Training Officer course. It is the responsibility of each organization and Training Officer to notify the BUREAU of any changes in the Training Officer's status.

TRAINING OFFICER RESPONSIBILITIES:

1. The Training Officer is responsible for developing and directing all CME training within their organization. They should:
 - a. Provide a training program in which 25 hours of CME per year is provided to the personnel of the agency, but all required areas must be covered in the four year period.
 - b. Specifically for various levels of certification, the training program needs to meet the following requirements:
 - (1) For EMT-IV, eight of the 100 hours must be in IV subjects.
 - (2) For EMT-Intermediate, 16 of the 100 hours must be topics in EMT-I subjects, such as advanced airway, intubation, medication administration, etc.
 - c. Ensure in a four year period that all the CME hour requirements herein are met.
2. The Training Officer must insure compliance to BUREAU policies and Teaching and Testing Protocols (TTP's) and the objectives herein, during all CME training sessions.
3. The Training Officer must insure persons conducting CME training are knowledgeable and qualified in the subjects they teach. Individuals who teach CME training sessions do not have to be EMT Instructors, but must be qualified in the subjects taught.

The CME program should be organized around the training and responsibilities of the EMT and meet the following objectives:

The purpose of Continuing Medical Education (CME) is to:

1. Develop the EMTs understanding of clinical and operational roles and responsibilities.
2. Develop skills in patient assessment and in all treatment procedures within the scope of the EMT.
3. Develop skill in the use and maintenance of all equipment required to render emergency medical care at the level of certification.
4. Provide opportunities for discussion, skill, practice, and critique of skill performance
5. Develop EMT's skills that are not used on a regular basis.
6. The CME credit hour is based upon one hour of participation.

CME REQUIREMENTS FOR RECERTIFICATION:

Option 1

24 hours	DOT Refresher Course (can be taught by local EMT instructors.)
2 hours	Well Being of the EMT
2 hours	Infection Control
2 hours	Airway
4 hours	Patient Assessment
2 hours	Communications and Documentation
2 hours	Medical Emergencies: Cardiac and Automatic External Defibrillation
6 hours	Trauma: including but not limited to: bleeding, shock, soft tissue, burns, kinetics, musculoskeletal, head and spine, eyes, face, chest, splinting and bandaging
2 hours	Obstetrics and Gynecology
2 hours	Operations: including but not limited to: lifting and moving, ambulance operations, extrication, triage
4 hours	Pharmacology and patient assisted medications
6 hours	Automatic External Defibrillation (AED)
8 hours	HAZMAT Awareness
4 hours	Pediatrics
<u>30 hours</u>	Electives
100 hours	

Option 2

4 hours	Well Being of the EMT
4 hours	Infection Control
4 hours	Airway
6 hours	Patient Assessment
4 hours	Communications and Documentation
4 hours	General Pharmacology and Patient Assisted Medications
6 hours	Medical Emergencies: Cardiac and Automatic External Defibrillation (AED)
6 hours	Medical Emergencies: Including but not limited to respiratory, allergic reactions, environmental abdominal, diabetes, behavioral, poisoning, drugs, and alcohol
12 hours	Trauma: including but not limited to: bleeding, shock, soft tissue, burns, kinetics, musculoskeletal, head and spine, eyes, face, chest, splinting and bandaging
4 hours	Pediatric patients
4 hours	Obstetrics and Gynecology
4 hours	Operations: including but not limited to: lifting and moving, ambulance operations, extrication, triage
8 hours	HAZMAT Awareness

<u>30 hours</u>	Electives
100 hours	Total

Specified Skills:

The specified skills are skills that an EMT must be able to perform at anytime, while some of the skills may not be routinely performed. These skills are incorporated into the CME hour requirements and are not additional requirements. Each EMT will complete the following skills at least two times throughout their certification, and provide a means for the second party documentation of the accomplishment of these skills. The skills will be accomplished as per the teaching and testing protocols.

Skill 1: Bandaging of the arm, elbow, shoulder, neck, top of head, cheek, protruding eye, ear, and open chest wound.

Skill 2: Splinting using hare traction or sager splint (choice based upon availability of equipment).

Skill 3: Splinting of at least one upper and lower extremity.

Skill 4: Cervical and spinal immobilization using c-collar, long board, head stabilization equipment (utilize available equipment) and straps.

Skill 5: Patient assisted medications: nitroglycerin, pre-loaded epinephrine, inhaler, and glucose.

Skill 6: Pediatric immobilization: in a car seat and backboard.

Skill 7: Insertion of nasopharyngeal and oropharyngeal airways.

Skill 8: Defibrillation of a patient in cardiac arrest using an AED.

The completion of the CME hours may be accomplished via several different means. The persons conducting CME training do not have to be Bureau certified EMT instructors. However, they shall be knowledgeable and qualified in the subjects they teach to the standards of the National Standard Curriculum and TTP.

Note: there is a limit to the number of CME hours that can be obtained by certain methods, and limit is identified in the following:

1. Group training:

- a. Workshops and seminars related to the required skills of an EMT and approved for CME credit by the Bureau or the Continuing Education Coordinating Board for EMS (CECBEMS).
- b. Local medical training meetings.
- c. Medical training meetings where a guest speaker presents material related to emergency medical care.
- d. Demonstration or practice sessions.
- e. Community emergency exercise and disaster drills. CME hours will only be provided for the time actually involved in the exercise (i.e. If exercise lasts for eight hours and you are only involved for four hours, you will only be allowed four hours. No more than 10 hours will be allowed during recertification period).
- f. Audiovisuals (films, videotapes) which illustrate and review proper emergency care procedures [must be viewed in presence of training officer (no more than 10 hours)].
- g. Specific college courses may be utilized only with the approval of the Bureau (no more than 10 hours). Classes such as biology, chemistry, anatomy and physiology don't require the Bureau's approval, but all other classes require Bureau approval.
- h. CPR training (no more than 16 hours in CPR in the four year period).

2. Teaching classes:

- a. Teaching general public (schools, scouts, clubs, or church groups) any topic within the scope of the Basic EMT.
- b. Teaching or coordinating EMS courses approved by the Bureau or teaching local EMS CME classes. (No more than 15 hours of CME will be credited for teaching classes during any certification period.)

3. Use of Audio-Visuals:

Audio-visuals (films, videotapes, etc) which illustrate and review proper emergency care procedures can be used, but no more than 10 hours of CME can be obtained using audio-visual only.

4. Computer use:

Utilizing computers, internet, software, or the like, which illustrate, practice, provide interactive use, or demonstrate proper emergency care procedures can be used, but no more than a total of 25 hours of CME can be obtained via this mode. These programs only can be utilized if approved by the Continuing Education Coordinating Board of Emergency Medical Services (CECBEMS) or the Bureau.

5. Journals

Only 5 hours of CME can be used by completing tests from various journals or publications, which are related to the EMT scope of practice.

CPR Requirement

The Bureau no longer requires that EMTs are limited to take American Heart Association's, American Red Cross, or National Safety Council CPR courses, but can use any Bureau approved CPR course. The Bureau has developed CPR course guidelines, in which agencies may develop their own CPR course. The agency CPR course must have Bureau approval prior to providing the course to their personnel. All EMTs must complete one course every two years

PVA

Completion of pediatric vascular access skills station is required for all personnel who are EMT-I, IV or Paramedic once during the certification period.

The Pediatric Vascular Access skills station is a three hour module consisting of a lecture of recognition and management of pediatric shock, skills station of peripheral access, which includes arm, scalp veins, and intraosseous needle placements.

CME RECORDS

1. Training officers must maintain records that provide verification of the following:
 - a. Dates of training;
 - b. Activity, CME topic, name, and number, (if applicable) of Instructor(s);
 - c. Documentation of students in attendance; and
 - d. Accurate documentation of the hours students actually attended each class.
2. Training officers must maintain records of CME received outside of the agency.
 - a. The Training Officer must sign for outside training sessions if you have documentation of the individual's attendance on file.
 - b. The Training Officer is responsible to verify authenticity of any training

documents from outside of their agency.

3. Training officers must maintain records of CPR certification and insure all personnel remain current. The individual providing and certifying CPR training must be a certified CPR Instructor with the respective certifying agency. If the agency develops its own CPR program, it must be a Bureau approved course.
4. A recognized Pre-hospital Trauma Life Support (PHTLS) Instructor must teach the course.
5. Maintain records of each individual EMTs practical recertification examination.
6. Maintain all CME records and provide periodic reports to the EMTs with their current recertification status.
7. All records must be maintained for seven years after the recertification period.
8. All CME records must be available for audit by the Bureau at all times.

AGENCY WRITTEN AND PRACTICAL TEST PROCEDURES

All written tests must be taken at a Bureau recognized state test site. Written test scheduling is done through the EMS office. Tests must be scheduled at least two weeks prior to the desired test date. For additional information, contact the EMS office at 801-538-6435.

Practical tests can be taken from the state by calling the Bureau to register for testing at a test site or they may be taken through an approved agency test site. Reciprocity applicants **must** test with the State Test Team.

The recertification written and practical examinations are designed to determine if an individual has maintained the minimum knowledge and skills required of an EMT. The knowledge and skill requirements are the same as those outlined in the EMT training course.

Any agency/organization who wishes to administer the practical test to their own EMTs or other recertifying EMTs must meet the following criteria before being approved by the Bureau.

1. Be a provider of medical care and/or EMS service to the community.
2. Have and maintain a roster of certified EMT members or employees, and make such roster available to the EMS Bureau upon request.
3. Have a functioning regularly scheduled CME program.
4. Have a designated Training Officer who will assume total responsibility for the EMT recertification practical testing program.
5. The designated Training Officer must attend a new Training Officer's Seminar before assuming responsibility for the testing program and must also attend a Training Officer Seminar every year.

6. Administer the practical test in accordance with EMS Bureau protocol and maintain absolute integrity in attesting to the individual EMTs competency in completing the practical examination.
7. Utilize only State certified EMT instructors to evaluate the practical test. The training officer cannot be counted as one of the required evaluators.
8. Conduct the test in a fair and unbiased manner.
9. Maintain records on all EMT practical tests administered in accordance with EMS Bureau guidelines for seven years past certification period.
10. Allow Bureau of EMS staff to access, without notice, any and all test sites and/or practical test and training records.
11. Submit annually to the Bureau, Standards and Evaluation Program, a proposed testing plan and schedule of testing for the ensuing year. The Bureau should be notified of any changes in the schedule.
12. Use the appropriate equipment for testing as designated in the testing protocol.
13. Conduct the recertification practical test no sooner than twelve months or later than one month prior to any EMT expiration date.
 - a. A maximum of two attempts to pass each test is allowed without additional training. The EMT must request the second test and pay all applicable testing fees. All retests must be completed before the EMTs expiration date or the EMT will be considered lapsed.
 - b. EMTs who fail both attempts, at either test, will be required to complete an entire EMT training course to be eligible for further testing.
 - c. If the EMT fails two or more scenarios on their first test, they must test with the state test team for the next test.
14. Provide the Bureau with a signed “Letter of Commitment” attesting to the agencies willingness to comply with requirements of this manual.
15. Adhere to all policies and procedures in the “Practical Recertification Examination” book.
16. The training officer can not validate their own recertification, it must be validated by another Bureau recognized training officer.
17. Submit a schedule of testing to the Bureau with the dates and times, and notify the Bureau of any changes.

AFFILIATED RECERTIFICATION CHECKLIST

The Training Officer must assure that the following information is completed for each recertifying EMT/Paramedic and on file with the agency:

1. Recertification Practical Test (EMT only).

2. Completion of a CPR course for all levels of EMT, and for Paramedic a ACLS and CPR course within the past two years.
3. Copy of all CME information.

The following must be submitted to the EMS Office in one complete package:

1. A completed, signed, and notarized application for each EMT/Paramedic recertifying.
2. A letter signed by the Training Officer verifying that each EMT/Paramedic recertifying has completed all the recertification requirements and that copies are on file with the agency.
3. A letter signed by the physician advisor verifying competency for EMT-Intermediate, IV, or Paramedic.
4. Fees must be submitted with recertification materials. **Fees may be paid by check or purchase order only.** Bureau will invoice only if they receive a purchase order. The Bureau must receive all fees and documents before recertification is completed.

NON-AFFILIATED RECERTIFICATION REQUIREMENTS

It is the responsibility of the individual EMT to submit their own recertification material. All required recertification materials shall be submitted to the Bureau of Emergency Medical Services.

The requirements for recertification are in accordance with the Bureau of Emergency Medical Services Ambulance Rules:

1. Recertification is required every four years. This period may be modified by the Bureau to standardize EMT recertification cycles.
2. To recertify as an Emergency Medical Technician (EMT)-Basic, an EMT shall:
 - a. Submit a completed, signed, and notarized recertification application. Criminal identification background checks will be made on all applications.
 - b. Submit verification of 25 hours of CME per year, which can be in any of the required areas. A total of 100 hours in all required areas must be completed in a four year period.
 - c. Submit verification of a current course completion in cardiopulmonary resuscitation (CPR).
 - d. Successfully complete all applicable Bureau written and practical examinations (practical may be taken either with approved test agency or the Bureau).
 - e. Submit appropriate fees.
3. Recertification as a Paramedic is a separate certification, and if the person is a paramedic they don't have to go through the EMT recertification process.
4. To recertify as an Emergency Medical Technician-Intermediate (EMT-I), an EMT-I shall:
 - a. Successfully complete the all EMT-B recertification requirements.

- b. Submit a completed, signed, and notarized application form.
 - c. Submit verification of 16 hours of the 100 hours of CME must be topics in EMT-I subjects, such as advanced airway, intubation, medication administration, etc.
 - d. Submit a letter to the Bureau from the Physician Advisor recommending the individual for recertification and verifying the individuals demonstrated proficiency in the following EMT-I skills:
 - (1) Initiating and terminating intravenous infusion, including pediatric vascular access.
 - (2) Insertion and removal of intraosseous needles.
 - (3) Administering medications via intramuscular, subcutaneous, and intravenous routes.
 - (4) Successful completion of advanced airway training.
 - (5) Submit verification of six month pass off of advanced airway skills.
 - (6) Completion of pediatric vascular access skills station.
 - e. Successfully complete the EMT-I written examination.
 - f. Submit all required fees
5. To recertify as an EMT-IV, an EMT shall:
- a. Successfully complete EMT-B recertification requirements.
 - b. Submit physician advisor letter verifying competency of IV skills, including pediatric vascular access skills station, and recommendation for certification.
 - c. Successfully complete the Bureau written IV examination.
 - d. Submit verification of eight hours of CME in advanced (IV) skills topics (as part of the 100 hours).
 - e. Submit appropriate fees

EMT INSTRUCTOR CERTIFICATION REQUIREMENTS

The requirements for EMT Instructor certification are as follows:

- 1. Be a certified Utah EMT for at least one year.
- 2. Submit documentation of 30 hours of patient care.
- 3. Submit documentation of current CPR Instructor certification from a Bureau approved agency.
- 4. Submit three letters of recommendation from health care providers, regarding EMS skills and teaching abilities.
- 5. Submit documentation of 15 hours teaching experience.
- 6. Successfully complete Bureau sponsored EMS Instructor seminar.

EMS INSTRUCTOR RECERTIFICATION REQUIREMENTS

The requirements for EMS Instructor recertification are as follows:

- 1. Maintain Utah EMT certification.

2. Submit verification of attendance at a Bureau sponsored Instructor Seminar at least once every two years.
3. Submit verification of 30 hours teaching experience within a certification period.
4. Submit verification of current CPR Instructor certification.

All verification materials must be submitted with recertification documents.

COURSE COORDINATOR CERTIFICATION REQUIREMENTS

The EMT course is a complex program, which requires a great deal of coordination and record keeping. Therefore, anyone serving as a Course Coordinator will be required to meet all of the following requirements:

1. Be an EMT Instructor for at least one year.
2. Be an Instructor of record (either primary or assistant) for at least one EMT-B course, and:
 - a. Teach a minimum of 15 hours.
 - b. Provide a written evaluation from the Course Coordinator.
3. Co-coordinate at least one EMT course with an approved Course Coordinator.
4. Review the course training standards and criteria with a designated representative of the Bureau Standards and Evaluations staff and complete the Bureau training for new Course Coordinators.
5. Receive approval from the Bureau Standards and Evaluations staff.
6. Agree to adhere to Bureau policies and training standards.
7. The first course coordinated will be a probationary course and will be evaluated for:
 - a. Compliance with Bureau Standards
 - b. Student performance.
8. Sign and submit to the Bureau a Training Standards Agreement annually.

COURSE COORDINATOR RECERTIFICATION REQUIREMENTS

1. Successfully complete requirements for EMT Instructor recertification.
2. Coordinate a minimum of one course every two years.
3. Satisfactory attendance at one Course Coordinator seminar every year.
4. Receive recertification recommendation from the Bureau Standards and Evaluations staff.

TRAINING OFFICER CERTIFICATION REQUIREMENTS

1. Current EMT/EMD instructor.
2. Successfully complete the new training officer seminar.
3. Submit a letter of designation from the agency represented.
4. Submit a letter of commitment to the department agreeing to abide by the policies and procedures in the Training Officer Manual.

TRAINING OFFICER RECETIFICATION REQUIREMENTS

1. Attend a training officer seminar once every year;
2. Be a current EMT/EMD instructor;
3. Submit a letter of commitment to the department agreeing to abide by the policies and procedures in the Training Officer Manual.

ADJUSTING EMT'S RECERTIFICATION DATE TO COINCIDE WITH THEIR AGENCY

The Bureau has assigned recertification dates to geographic areas and agencies to facilitate the test scheduling and recertification process. Since the inception of the approved agency testing procedure, it is imperative that the Bureau try to assist the individual EMTs to recertify with their own agency. Therefore, the Bureau will adjust the individual's EMT certification when they meet the following criteria:

1. The EMT has moved to a new geographical location or has changed to a different provider service, within their certification period. Changes will not be made for individuals who have multiple provider agencies when their certification date is applicable to one of those agencies.
2. The EMT and/or the Provider agency must request the adjustment, in writing, prior to the EMTs assigned recertification date.
3. The EMTs total certification period cannot exceed four years. CME hours will be adjusted accordingly. No extensions will be given.
4. All recertification changes must be completed before the EMTs expiration date.

LAPSED CERTIFICATION

An EMT will be considered lapsed if one of the following conditions exists:

1. An EMT has not turned in all recertification requirements to the Bureau by their expiration date.
2. An EMT does not complete 25 hours of CME per year.
3. An EMT does not maintain the current CPR course completion requirement.

If an EMT has extenuating circumstances, which prevented him/her from completing the requirements, a written request to waive the lapsed fee must be submitted to the Bureau prior to his/her expiration date, if possible.

Any EMT who has completed all recertification requirements but who has failed one of the tests prior to the expiration date and who does not have adequate opportunity to retest prior to his/her expiration date, will not be considered lapsed.

A lapsed EMTs recertification will be assigned as follows:

1. If the EMT completed most of the requirements before he/she lapsed and has been lapsed for six months or less, the new expiration date will be four years from his /her last expiration date.
2. If the EMT has lapsed for more than six months, the new expiration date will be four years from the quarter that all recertification requirements are met.
3. If the EMT is with an agency, the Training Officer may be contacted to see what recertification date the EMT should have. However, this period can never be longer than four years.

If certification has lapsed for longer than one year, the individual must complete another EMT course to become eligible to certify. Contact the Bureau for extenuating circumstances.

Instructors or Course Coordinators who allow their Instructor or Course Coordinator certification to lapse will be considered on an individual basis.

EMT RECIPROCITY REQUIREMENTS

1. EMTs currently certified by another state EMS Agency or National Registry may request reciprocity by meeting the following:
 - a. Complete and submit an application. The application requires two signatures, one on the front and one on the back, and must be notarized.
 - b. Submit a photo for an identification badge, not larger than 1-1/4 X 1'1/2.
 - c. Submit a copy of a current state certificate, identification badge, or National Registry badge. The Bureau will verify certification. If certified through National Registry, the applicant must also submit name and address of the training institution.
 - d. Submit a copy of current CPR certification or completion of a Bureau-approved course within the past two years.
 - e. Verification of 25 hours of continuing medical education within the past year. (Course completion certificate or letter of verification required.)
 - f. Successfully complete written certification examination.
 - g. Successfully complete the recertification practical examination administered by the State Test Team.
 - h. Submit payment of the required fees.
 - i. Submit to a background and fingerprint check.
 - j. Attendance at a Bureau reciprocity orientation meeting.

All documentation and test fees must be submitted in one complete packet. Incomplete packets will be returned to sender, and no tests will be scheduled until a complete packet is received. Fees are not refundable, and fingerprints will be submitted to the Bureau of Criminal Identification for a complete background check. The certification period will be for four years.

UTAH PARAMEDIC RECIPROCITY INFORMATION

The Utah State Department of Health, Bureau of Emergency Medical Services, will accept application for reciprocal paramedic status from persons who:

1. Completed the current DOT paramedic standard curriculum. A copy of current state certificate, and name and address of training institution must be submitted.
2. Submit completed application along with a picture, not larger than 1 ¼" X 1 ½". This application requires two signatures, one on the front and one on the back, and must be notarized.
3. Submit to a background and fingerprint check.
4. Successfully complete the Bureau written and practical examination.
5. Submit current Bureau approved advanced cardiac life support (ACLS) course completion.
6. Submit current PALS course completion.
7. Submit documentation of 25 hours of CME within the past year.
8. Submit payment of the required fees:

All documents and fees must be submitted in one complete packet. Incomplete packets will be returned to the sender. You will not be allowed to test until this office receives all documentation.

Applicants will be tested in all or any combination of the following:

- A. Mega code
- B. Trauma code
- C. Pediatric code
- D. Airway management, including:
 1. BLS airway
 2. Endotracheal and esophageal intubation (pediatric and adult)
 3. Removal of foreign object
 4. Suctioning.
- E. Administration of intravenous solutions and intravenous medication.
- F. Administration of the drugs in adult and pediatric dosages. The list of required drugs are listed in the Minimum Drug, Supplies and Equipment Standards available at the Bureau.
- G. Arrhythmia recognition and treatment
- H. Gastric suction by intubation

- I. Needle aspiration of the chest
- J. Phlebotomy or drawing blood specimens for analysis
- K. Splinting and bandaging
- L. Soft tissue injuries
- M. Extrication and movement of injured persons
- N. Bleeding wounds and shock
- O. Emergency childbirth
- P. Medical and environmental emergencies
- Q. Cricothyroidotomy
- R. Intraosseous Infusion

If the student feels they are deficient in any of the above skills or subject areas, they will be required to make arrangements with a training institution or others as approved by the Bureau to alleviate those deficiencies.

This certification will be valid for a period of four years. At the end of that time, the applicant will be required to recertify following the procedures outlined in the Paramedic Recertification Guidelines.